

THE STATE OF IDAHO SUPREME COURT

CERTIFICATE OF COMPLETION OF ADDITIONAL CIVIL CASE MEDIATION EDUCATION

Reporting period: January 1, _____ through December 31, _____

District: _____

Name: _____

Address: _____

Phone: _____

Email: _____

To the Supreme Court of the state of Idaho:

I, _____ (Print), hereby certify under penalty of perjury that I have completed a minimum of twenty (20) hours of additional mediator education as outlined below, which education has consisted of courses, seminars, or training sessions which have been sponsored or approved by an accredited college or university, the Idaho Mediation Association, Idaho State Bar, Idaho Supreme Court, Association of Family and Conciliation Courts (AFCC), or Association for Conflict Resolution (ACR – a merged organization of AFM, CREnet and SPIDR), as required by Rule 16(k)(13)(A)(ii) of the Idaho Supreme Court Rules of Civil Procedure.

Course Title and Principal Trainer(s)	Course Date(s)	Course Location	Name of College or Other Entity Listed Above which Sponsored or Approved Training	Actual Training Hours
TOTAL				

(Attach a separate sheet of paper as an addendum to this certificate if additional space is needed.)

Dated this _____ day of _____, 20____.

Signature

Subscribed and sworn to before me, a Notary Public, this _____ day of _____, 20____
Notary Public: _____ Residing at: _____
Commission expiration date: _____